PTO/SB/01A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s), I/we declare that:							
This declaration is directed to:							
	$\boxtimes$	The attached application, or					
		Application No. , filed on ,					
		as amended on _	(if applicable);				
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;							
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;							
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and							
All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.							
FULL NAME OF I	NVENTOR(S	3)					
Inventor 1	Mr. Jo	ohn O. Lamping	Date:	12/5/2001			
Signature:	hr o	Jr.	Citizen of: Un	ited States			
Inventor 2	Mr. R	amana Venkata	Date:	12/05/2001			
Signature:	Qui	ullene	Citizen of: Inc	lia			
Inventor 3	Shash	nidhar Thakur	Date:	12/5/2001			
Signature:	shaphi.	thakw	Citizen of: Inc	lia			
Inventor 4	Same	er Siruguri	Date:	Dec 5, 2001			
Signature:	Same	nduand	Citizen of: Inc	lia			
Additional inventors are being named on form(s) attached hereto.							

Burden Hour Statement: This collection of information is required by 35 U S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

PA 3182747 v1

PTO/SB/81 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	Unassigned			
Filing Date	Herewith			
First Named Inventor	John O. Lamping			
Group Art Unit	Unassigned			
Examiner Name	Unassigned			
Attorney Docket Number	020087-003500US			

I hereby app	point:				Place Customer				
☑ Practitioners at Customer Number 20350				<b></b>	Place Customer Number Bar Code				
OR	- u(-)			Ĺ	Label here				
☐ Practitioner(s) named below:									
	Nam	9		Registration	n Number				
-						•			
						J			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.									
Please chang	e the correspondence add	ress for the above-ide	ntified an	plication to:					
	e-mentioned Customer Nu		ou up	p					
OR	S-memioned Oustomer Nui	nibot.							
☐ Firm <i>or</i>									
Individua	Name								
Address									
Address									
City			State		ZIP				
Country									
Telephone			Fax						
I am the:					···				
☐ Applica	Applicant/Inventor.								
		terest. See 37 CFR 3	.71.						
Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
SIGNATURE of Applicant or Assignee of Record									
Name		RAMANIA	VEN	KATA-					
Signature	Grubal	e-e							
Date		1/2001							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.									
Submit multiple forms if more than one signature is required, see below*.									
Total of forms are submitted.									

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. PA 3187130 v1